

PROPERTY NAME		CITY, STATE	CITY, STATE	
PROSPECT'S FULL NAME		SELLING BROKER'S FU	SELLING BROKER'S FULL NAME	
COMPANY (IF APPLICABLE)		COMPANY	COMPANY	
ADDRESS		ADDRESS	ADDRESS	
CITY, STATE, ZIP				
TELEPHONE	FACSIMILE	TELEPHONE	FACSIMILE	
Prospect, as identified above, is interested in the acquisition of the above-named Property and has engaged				
Prospect Acknowledgme	ent	Selling Broker Acknow	elling Broker Acknowledgment	
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PROSPECT'S SIGNATURE	DATE	SELLING BROKER'S SIGNA	TURE DATE	
We have received this Registration & Confidentiality Agreement and accept the Prospect as listed above and agree that in the event a transaction is consummated with a Prospect from which a commission is paid to the Listing Broker, that an agreed upon portion of such commission shall be paid to the Selling Broker.				

1901 Main Street, Suite 175 Irvine, California 92614

Telephone: (949) 622 - 3400 Facsimile: (949) 622 – 3410 Website: www.atlashospitality.com

CA BRE Lic.: 01216856

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Date

Atlas Hospitality Group